Use

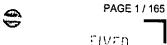
Only

FE5AN018

**FEC** FORM 3

## REPORT OF RECEIPTS **AND DISBURSEMENTS**

For An Authorized Committee



**FEC FORM 3** 

(Revised 02/2003)

EIVEN,

14 DEC -4 PM 5: 19 Office Use Only

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
ALEXANDER FOR SE				1
ADDRESS (number and street)	228 S WASHINGTON STR	EET SUITE 115		
Check if different than previously reported. (ACC)	Alexandria		VA 22314	-5404
2. FEC IDENTIFICATION N	JMBER ▼CI	TY A	STATE	ZIP CODE
C C00383745	3. IS T		AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REPORT (Ch.  (a) Quarterly Reports:  April 15 Quarterly R  July 15 Quarterly R  October 15 Quarter  January 31 Year-En  Termination Report	Report (Q1) eport (Q2) ly Report (Q3) d Report (YE) (C) 30-Di	PRE-Election Report for the Primary (12P)  Convention (12C)  tion on Post-Election Report for the Primary (12P)  General (30G)	General (12G) Special (12S)	in the State of Special (30S) in the State of TN
5. Covering Period  1 certify that I have examined the Type or Print Name of Treasurer		through  f my knowledge and belief it		2014 , v v v v v v v v v v v v v v v v v v
Signature of Treasurer Keith	Davis Just	of Dair	Date 12 c	04 / Y Y Y Y Y Y Y 2014
NOTE: Submission of false, errone	ous, or incomplete information	on may subject the person sign	ing this Report to the pen	alties of 2 U.S.C. §437g.